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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|--------------------|--|---|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your | e the name that is on government-issued ure identification (for mple, your driver's | Lynn First name | First name |
| | | ise or passport). | Middle name | Middle name |
| | iden | Bring your picture identification to your meeting with the trustee. | Denn Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | de your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security ober or federal vidual Taxpayer tification number | xxx-xx-3506 | |

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Debtor 1 Lynn Denn

Document Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|--|--|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 15016 Castlebar Lane Orland Park, IL 60462 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code | If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code |
| 6. Why you are choosing this district to file for bankruptcy | | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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Page 3 of 45 Document Case number (if known) Debtor 1 Lynn Denn Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District

11. Do you rent your residence?

No.

Go to line 12.

Debtor

District

☐ Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

When

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Relationship to you

Case number, if known

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Document Page 4 of 45 Case number (if known) Debtor 1 Lynn Denn Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property?

Number, Street, City, State & Zip Code

or a building that needs urgent repairs?

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Debtor 1 Lynn Denn Document Page 5 of 45 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Answer These Questions for Reporting Purposes 16. What kind of debts do you have? 16a. Are your debts primarily consumer debts? Consumer debts are defined in 1 individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you money for a business or investment or through the operation of the business or No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. | u incurred to obtain r investment. | | | | | |
|--|---|--|--|--|--|--|
| you have? individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. Are your debts primarily business debts? Business debts are debts that you money for a business or investment or through the operation of the business or No. Go to line 16c. Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. | u incurred to obtain r investment. | | | | | |
| 16b. Are your debts primarily business debts? Business debts are debts that you money for a business or investment or through the operation of the business or \[\begin{align*} \text{No. Go to line 16c.} \\ \text{Yes. Go to line 17.} \\ \text{16c.} \text{State the type of debts you owe that are not consumer debts or business debts} \\ \text{17. Are you filing under} \text{No.} \text{I am not filing under Chapter 7. Go to line 18.} \end{align*} | r investment. | | | | | |
| money for a business or investment or through the operation of the business or \[\begin{align*} \text{No. Go to line 16c.} \\ \text{Yes. Go to line 17.} \] 16c. State the type of debts you owe that are not consumer debts or business debts \[\begin{align*} \text{To Money of 18.} \] 17. Are you filing under \[\begin{align*} \text{No.} \text{I am not filing under Chapter 7. Go to line 18.} \] | r investment. | | | | | |
| Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under | | | | | | |
| 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under | | | | | | |
| 17. Are you filing under \[\begin{array}{c} No. \end{array} \] I am not filing under Chapter 7. Go to line 18. | | | | | | |
| | excluded and administrative expenses | | | | | |
| Grapher 7: | excluded and administrative expense | | | | | |
| Do you estimate that after any exempt property is example after any exempt property is excluded and Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and | | | | | | |
| administrative expenses are paid that funds will | | | | | | |
| be available for Yes distribution to unsecured creditors? | | | | | | |
| you estimate that you owe? 50-99 | 25,001-50,000 50,001-100,000 More than100,000 | | | | | |
| estimate your assets to be worth? □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$100,000 □ \$50,000,001 - \$100 million □ | \$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion | | | | | |
| estimate your liabilities to be? □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$100,001 - \$500,000 □ \$50,000,001 - \$100 million □ | \$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion \$10,000,000,001 - \$50 billion More than \$50 billion | | | | | |
| Part 7: Sign Below | | | | | | |
| For you I have examined this petition, and I declare under penalty of perjury that the information pr | provided is true and correct. | | | | | |
| United States Code. I understand the relief available under each chapter, and I choose to | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | |
| If no attorney represents me and I did not pay or agree to pay someone who is not an atto document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | orney to help me fill out this | | | | | |
| I request relief in accordance with the chapter of title 11, United States Code, specified in | this petition. | | | | | |
| I understand making a false statement, concealing property, or obtaining money or proper bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or and 3571. /s/ Lynn Denn | | | | | | |
| Lynn Denn Signature of Debtor 2 Signature of Debtor 1 | | | | | | |
| Executed on January 24, 2018 Executed on | | | | | | |
| MM / DD / YYYY | YYYY | | | | | |

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Debtor 1 Lynn Denn Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Eric Zelazny | Date | January 24, 2018 | |
|--|---------------|------------------|--|
| Signature of Attorney for Debtor | | MM / DD / YYYY | |
| Eric Zelazny | | | |
| Printed name | | | |
| Law Offices of Eric Zelazny | | | |
| Firm name | | | |
| 18400 Maple Creek Drive Suite 600 | | | |
| Chicago Heights, IL 60411 | | | |
| Number, Street, City, State & ZIP Code | | | |
| Contact phone 708-444-4333 | Email address | eric@lwslaw.com | |
| | | | |
| Bar number & State | | | |

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| | | 17(7(1)) | $\frac{1}{1}$ | |
|---------------------|--------------------------|-------------------|---------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lynn Denn | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is a amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|--|------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 149,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 2,350.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 151,350.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | | abilities It you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 142,378.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 23,459.00 |
| | Your total liabilities | \$ | 165,837.00 |
| Paı | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,495.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,747.60 |
| Paı | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. |

1,495.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cl | aim |
|--|----------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| | | | | ment Page 10 of 45 | .0 10.10. | 1 . D 0. | 50 1114111 |
|--|---|---|--------------------|---|------------------|------------------------|--|
| Fill in this inforn | nation to identify you | ır case and this f | filing | | | | |
| Debtor 1 | Lynn Denn First Name | Middle Nar | me | Last Name | | | |
| Debtor 2 | i not itamo | Wildio Hai | | Last Name | | | |
| (Spouse, if filing) | First Name | Middle Nar | me | Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN D | DISTE | RICT OF ILLINOIS | | | |
| Case number _ | | | | | | | ☐ Check if this is an amended filing |
| Official Fo | rm 106A/B | | | | | | |
| Schedule | e A/B: Pro | perty | | | | | 12/15 |
| hink it fits best. Be information. If more answer every quest Part 1: Describe | e as complete and accu e space is needed, attac tion. Each Residence, Buildi | rate as possible. If th a separate sheet ng, Land, or Other | f two i t to th | only once. If an asset fits in more than one married people are filing together, both are is form. On the top of any additional pages Estate You Own or Have an Interest In ence, building, land, or similar property? | equally response | onsible for su | pplying correct |
| ☐ No. Go to Part Yes. Where is | | | | | | | |
| 1.1 16213 92n Street address, i | d Avenue if available, or other description | | What | is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative | the amount | of any secure | nims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. |
| T:! D | l- II 66 | 107 0000 | | Manufactured or mobile home | Current val | | Current value of the |
| Tinley Par | k IL 60 State | 21P Code | | Land | entire prop | erty? .9,000.00 | portion you own? \$149,000.00 |
| City | State | ZIF Code | | Investment property Timeshare | | | |
| | | | | Other | (such as fe | e simple, ten | our ownership interest ancy by the entireties, or |
| | | ` | | nas an interest in the property? Check one | a life estate | e), if known. | |
| Cook | | | _ | Debtor 1 only Debtor 2 only | | | |
| County | | | | Debtor 1 and Debtor 2 only | — Chaok | if this is som | munity property |
| | | | | At least one of the debtors and another information you wish to add about this iter rty identification number: | (see ins | tructions) | munity property |
| pages you have Describe Do you own, leas someone else drive | ave attached for Part Your Vehicles se, or have legal or e | quitable interest | in ar | rour entries from Part 1, including any here | ed or not? In | iclude any ve | \$149,000.00 Phicles you own that |
| ■ No | | | | | | | |
| □ Yes | | | | | | | |

Official Form 106A/B Schedule A/B: Property page 1

| De | btor 1 | Lynn Denn | Document Page 11 of 45 Case number (if known) | |
|-----|----------------------------|-----------------------------|--|---|
| | | ift, aircraft, mot | tor homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories | |
| | No | | | |
| |] Yes | | | |
| | | | | |
| | | | the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=> | \$0.00 |
| Par | t 3: Des | cribe Your Perso | onal and Household Items | |
| Do | you ow | n or have any l | egal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 1 | <i>Example</i> □ No | , | rurnishings nces, furniture, linens, china, kitchenware | |
| | Yes. | Describe | | |
| | | | Used livingroon, kitchen and bedroom furniture | \$900.00 |
| | No | es: Televisions a | nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music c phones, cameras, media players, games | ollections; electronic devices |
| | | • | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, ons, memorabilia, collectibles | or baseball card collections; |
| | ☐ Yes. | Describe | | |
| 1 | Example No | musical instru | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a | and kayaks; carpentry tools; |
| ļ | ⊔ Yes. | Describe | | |
| | ■ No | | s, shotguns, ammunition, and related equipment | |
| 1 | □ No É | les: Everyday clo | othes, furs, leather coats, designer wear, shoes, accessories | |
| | Yes. | Describe | | |
| | | | Used womens clothing | \$250.00 |
| | No . | | welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g | jold, silver |
| 13. | Non-far Example ■ No | m animals Jes: Dogs, cats, | birds, horses | |

Schedule A/B: Property

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| De | | ase 18-02103 | Doc 1 | Filed 01/24/18 Document | Entered 01/24/18 18:19:14 Page 12 of 45 Case number (if known) | Desc Main |
|-----|-----------------------------------|---|-----------------------------|--|---|---|
| 14. | | | old items vou | u did not already list. in | ncluding any health aids you did not list | |
| | ■ No | | | , | , j | |
| | ☐ Yes. Give | e specific information | | | | |
| 15 | | | | om Part 3, including ar | ny entries for pages you have attached | \$1,150.00 |
| | | | | | | |
| | | e Your Financial Assets | | est in any of the followi | ing? | Current value of the |
| Ъ. | , you own or | Thave any legal of ec | quitable littere | est in any of the following | ing: | portion you own? Do not deduct secured claims or exemptions. |
| | ■ No | Money you have in yo | | | sit box, and on hand when you file your petition | on |
| | | Checking, savings, or | | al accounts; certificates o counts with the same inst | f deposit; shares in credit unions, brokerage hitution, list each. | nouses, and other similar |
| | Yes | | | Institution na | ame: | |
| | | 17.1. | Checking | Chase Ba | nk | \$1,200.00 |
| | | | | ith brokerage firms, mon | ey market accounts | |
| | Non-public joint ventu ■ No | | nterests in in | corporated and uninco | orporated businesses, including an interes | t in an LLC, partnership, and |
| | ☐ Yes. Give | e specific information a Nam | about them ne of entity: | | % of ownership: | |
| 20. | Negotiable | instruments include pe | ersonal check | | egotiable instruments nissory notes, and money orders. by signing or delivering them. | |
| | | specific information a Issu | bout them er name: | | | |
| | | or pension accounts Interests in IRA, ERIS | | 1(k), 403(b), thrift savings | s accounts, or other pension or profit-sharing | plans |
| | ☐ Yes. List (| each account separate Type o | ely. f account: | Institution na | ame: | |
| | Your share Examples: | | s you have ma | | inue service or use from a company tric, gas, water), telecommunications compar | nies, or others |
| | ■ No □ Yes | | | Institution na | ame or individual: | |
| 23. | Annuities (| | lic payment of | money to you, either for | life or for a number of years) | |
| | ■ No □ Yes | Issuer name | e and descripti | ion. | | |
| | | an education IRA, in § 530(b)(1), 529A(b), a | | n a qualified ABLE pro | gram, or under a qualified state tuition pro | ogram. |

| | | Case 18-02103 | Doc 1 | Filed 01/24/18 Document | Entered 01/24/18 18:19:14 Page 13 of 45 | Desc Main | | | |
|---|---|--|-----------------------------|----------------------------|---|--|--|--|--|
| De | ebtor 1 | Lynn Denn | | Boodinent | Case number (if known) | | | | |
| ■ No □ Yes | | | | | | | | | |
| | 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No | | | | | | | | |
| ☐ Yes. Give specific information about them | | | | | | | | | |
| | 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No □ Yes. Give specific information about them | | | | | | | | |
| | | es, franchises, and other g | | naibles | | | | | |
| | Examp ■ No | oles: Building permits, exclus | sive licenses, | | n holdings, liquor licenses, professional license | es | | | |
| | | Give specific information al | Jour mem | | | | | | |
| IVI | oney or p | property owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | |
| 28. | Tax ref | unds owed to you | | | | | | | |
| | ■ No | | | | | | | | |
| | ⊔ Yes. (| Give specific information ab | out them, inc | cluding whether you alrea | ady filed the returns and the tax years | | | | |
| 29. | | support | alimony spou | usal support, shild suppo | ort, maintenance, divorce settlement, property | cattlement | | | |
| | ■ No | iles. Fast due of lump sum a | ашпопу, ѕрос | usai support, crilia suppo | nt, maintenance, divorce settlement, property | settlement | | | |
| | ☐ Yes. | Give specific information | | | | | | | |
| | | | | | | | | | |
| 30. | Examp _ | mounts someone owes y ples: Unpaid wages, disabilit benefits; unpaid loans | y insurance p | | efits, sick pay, vacation pay, workers' comper | sation, Social Security | | | |
| | ■ No □ Yes. | Give specific information | | | | | | | |
| | | ts in insurance policies | | | | | | | |
| 31. | | | insurance; h | nealth savings account (F | HSA); credit, homeowner's, or renter's insuran | ce | | | |
| | ☐ Yes. I | Name the insurance compa Comp | ny of each po pany name: | olicy and list its value. | Beneficiary: | Surrender or refund value: | | | |
| 32. | If you a | erest in property that is dare the beneficiary of a living ne has died. | | | d surance policy, or are currently entitled to rece | vive property because | | | |
| | _ | Give specific information | | | | | | | |
| 33. | 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue | | | | | | | | |
| | ■ No □ Yes. | Describe each claim | | | | | | | |
| 34. | Other o | ontingent and unliquidate | ed claims of | every nature, including | g counterclaims of the debtor and rights to | set off claims | | | |
| | ☐ Yes. | Describe each claim | | | | | | | |
| | Any fin ■ No | ancial assets you did not | already list | | | | | | |
| | | Give specific information | | | | | | | |

Official Form 106A/B

Case 18-02103 Doc 1 Filed 01/24/18 Entered 01/24/18 18:19:14 Desc Main Page 14 of 45

Case number (if known) Document Debtor 1 Lynn Denn Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,200,00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$149,000.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,150.00 Part 4: Total financial assets, line 36 \$1,200.00 58. Part 5: Total business-related property, line 45 \$0.00

\$0.00

\$0.00

Copy personal property total

\$2,350.00

Official Form 106A/B Schedule A/B: Property page 5

Part 6: Total farm- and fishing-related property, line 52

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

\$2,350.00

\$151,350.00

| | C | ase 18-02103 | Doc 1 | Filed 01/24/18 | Entered 01/24/18 18:19:1 | 4 Desc Main |
|--|------------------|--|----------------|--------------------------|--|------------------------------------|
| Fil | l in this info | rmation to identify yo | ur case: | | | |
| De | btor 1 | Lynn Denn | | | | |
| Do | btor 2 | First Name | Mic | ddle Name | Last Name | |
| | ouse if, filing) | First Name | Mic | ddle Name | Last Name | |
| Un | ited States E | Sankruptcy Court for the | e: NORTH | IERN DISTRICT OF ILL | INOIS | |
| Ca | se number | | | | | |
| | nown) | | | | | Check if this is an amended filing |
| Of | fficial F | orm 106C | | | | |
| S | chedu | Ie C: The P | roper | ty You Clair | m as Exempt | 4/16 |
| the nee | property you | listed on <i>Schedule A/E</i> and attach to this page | B: Property (0 | Official Form 106A/B) as | gether, both are equally responsible for su your source, list the property that you clain Page as necessary. On the top of any add | m as exempt. If more space is |
| For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. | | | | | | |
| Pa | rt 1: Iden | tify the Property You | Claim as Ex | empt | | |
| 1. | Which set | of exemptions are you | u claiming? | Check one only, even if | your spouse is filing with you. | |
| | ■ You are | claiming state and fede | eral nonbank | ruptcy exemptions. 11 | U.S.C. § 522(b)(3) | |
| | ☐ You are | claiming federal exemp | otions. 11 U | .S.C. § 522(b)(2) | | |
| 2. | For any pro | operty you list on Sch | nedule A/B tl | hat you claim as exem | ot, fill in the information below. | |
| | Brief descrip | ption of the property and | l line on | Current value of the | Amount of the exemption you claim S | pecific laws that allow exemption |

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|--|---|-----------------------------------|---|------------------------------------|
| | Copy the value from Check only one box for each exemption. Schedule A/B | | | |
| 16213 92nd Avenue Tinley Park, IL 60487 Cook County | \$149,000.00 | | \$6,622.00 | 735 ILCS 5/12-901 |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used livingroon, kitchen and bedroom furniture | \$900.00 | | \$900.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Used womens clothing Line from Schedule A/B: 11.1 | \$250.00 | | \$250.00 | 735 ILCS 5/12-1001(a) |
| Line Holl Schedule A.B. 1111 | | | 100% of fair market value, up to any applicable statutory limit | |
| Checking: Chase Bank Line from Schedule A/B: 17.1 | \$1,200.00 | | \$1,200.00 | 735 ILCS 5/12-1001(b) |
| Line from Goricadie A/D. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |

3. Are you claiming a homestead exemption of more than \$160,375?

| The year comming a nemerous exemption of more man process. | |
|---|--------------------------------------|
| (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed of | on or after the date of adjustment.) |

No

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

☐ Yes

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Page 16 of 45 Case number (if known) Debtor 1 Lynn Denn

| | | <u> Document P</u> | age 17 (| <i></i> | | |
|--|--|--|---|---|--|--------------------------|
| Fill in this informatio | n to identify you | ır case: | | | | |
| Debtor 1 L | ynn Denn | | | | | |
| | rst Name | Middle Name La | st Name | | - | |
| Debtor 2 | rst Name | Middle Name La | st Name | | | |
| (Spouse if, filing) Fir | st name | Middle Name La | ist ivame | | | |
| United States Bankrup | otcy Court for the | NORTHERN DISTRICT OF ILLING | DIS | | - | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | t if this is an |
| | | | | | amen | ded filing |
| Official Form 10 | neD | | | | | |
| Official Form 10 | | | | | | |
| Schedule D: | Creditors | Who Have Claims Se | cured | by Propert | У | 12/15 |
| | | If two married people are filing together, k | | | | |
| s needed, copy the Addi number (if known). | itional Page, fill it | out, number the entries, and attach it to th | is form. On t | he top of any additio | nal pages, write your na | me and case |
| . Do any creditors have | claims secured b | y your property? | | | | |
| ☐ No. Check this | box and submit t | his form to the court with your other sch | edules. You | have nothing else t | to report on this form. | |
| _ | | , | | 3 | • | |
| | f the information | helow | | | | |
| | f the information | below. | | | | |
| Part 1: List All Sec | cured Claims | | | Column A | Column B | Column C |
| Part 1: List All Sec 2. List all secured claim | cured Claims s. If a creditor has | below. more than one secured claim, list the creditors in Fermions and particular claim, list the other creditors in Fermions | | Column A Amount of claim | Column B Value of collateral | Column C Unsecured |
| Part 1: List All Sec 2. List all secured claim for each claim. If more th | s. If a creditor has | more than one secured claim, list the creditor | | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| Part 1: List All Sec 2. List all secured claim for each claim. If more th | s. If a creditor has | more than one secured claim, list the creditors in F | Part 2. As | Amount of claim | Value of collateral | Unsecured |
| Part 1: List All Sec 2. List all secured claim for each claim. If more th much as possible, list the | s. If a creditor has | more than one secured claim, list the creditor a particular claim, list the other creditors in a cal order according to the creditor's name. | Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List All Secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name | s. If a creditor has | more than one secured claim, list the creditors a particular claim, list the other creditors in a cal order according to the creditor's name. Describe the property that secures the call of the cook County As of the date you file, the claim is: Check | Part 2. As Sart 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List All Secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 | s. If a creditor has an one creditor has claims in alphabet | more than one secured claim, list the creditors a particular claim, list the other creditors in local order according to the creditor's name. Describe the property that secures the claim 392nd Avenue Tinley Park 60487 Cook County As of the date you file, the claim is: Checlapply. | Part 2. As Sart 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List All Secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name | s. If a creditor has lan one creditor has claims in alphabet | more than one secured claim, list the creditors a particular claim, list the other creditors in a particular claim, list the other creditors in a cal order according to the creditor's name. Describe the property that secures the calculation of the property that secures the calculation of the control of the property that secures the calculation of the property that secures the calculation of the control of the control of the calculation of the ca | Part 2. As Sart 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 Virginia Beacl | s. If a creditor has lan one creditor has claims in alphabet | more than one secured claim, list the creditors a particular claim, list the other creditors in local order according to the creditor's name. Describe the property that secures the claim 392nd Avenue Tinley Park 60487 Cook County As of the date you file, the claim is: Checlapply. | Part 2. As Sart 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 Virginia Beacl | s. If a creditor has an one creditor has claims in alphabet on, VA 23450 State & Zip Code | more than one secured claim, list the creditors a particular claim, list the other creditors in a particular claim, list the other creditors in a cal order according to the creditor's name. Describe the property that secures the calculated and the property of the claim is: Check county As of the date you file, the claim is: Check capply. Contingent Unliquidated | Part 2. As Sart 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 Virginia Beacl Number, Street, City, S | s. If a creditor has an one creditor has claims in alphabet on, VA 23450 State & Zip Code | more than one secured claim, list the creditors a particular claim, list the other creditors in a cal order according to the creditor's name. Describe the property that secures the call of the call of the property that secures the call of the property that secures the call of the | Part 2. As Salaim: K, IL k all that | Amount of claim Do not deduct the value of collateral. \$142,378.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 Virginia Beacl Number, Street, City, \$1.50 Who owes the debt? | s. If a creditor has an one creditor has claims in alphabet on, VA 23450 State & Zip Code | more than one secured claim, list the creditors a particular claim, list the other creditors in a cal order according to the creditor's name. Describe the property that secures the calculated and the property that secures the calculated are calculated and the property that secures the calculated are calculated and the property that secures the calculated are calculated and the property that secures the calculated are calculated and the calculated are calculated as a calculated and the calculated are calculated as a calculated are calculated and the calculated are calculated as a calculated are calculated and the calculated are calculated as a calculated are calcul | Part 2. As Salaim: K, IL k all that | Amount of claim Do not deduct the value of collateral. \$142,378.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 Virginia Beack Number, Street, City, Street, City, Street and Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | ecured Claims as If a creditor has an one creditor has claims in alphabet h, VA 23450 State & Zip Code Check one. | more than one secured claim, list the creditors a particular claim, list the other creditors in a cal order according to the creditor's name. Describe the property that secures the call of the call of the property that secures the call of the property that secures the call of the | claim: K, IL k all that | Amount of claim Do not deduct the value of collateral. \$142,378.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 Virginia Beack Number, Street, City, Street, City, Street and Debtor 1 only Debtor 2 only At least one of the del | s. If a creditor has an one creditor has claims in alphabet the clai | more than one secured claim, list the creditors a particular claim, list the other creditors in local order according to the creditor's name. Describe the property that secures the claim 3 92nd Avenue Tinley Park 60487 Cook County As of the date you file, the claim is: Checapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mort car loan) | claim: K, IL k all that | Amount of claim Do not deduct the value of collateral. \$142,378.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all secured claim for each claim. If more the much as possible, list the 2.1 Loancare Inc Creditor's Name Po Box 8068 Virginia Beack Number, Street, City, Street, City, Street and Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 | s. If a creditor has an one creditor has claims in alphabet the clai | more than one secured claim, list the creditors a particular claim, list the other creditors in Iscal order according to the creditor's name. Describe the property that secures the claim 16213 92nd Avenue Tinley Park 60487 Cook County As of the date you file, the claim is: Checapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mort car loan) Statutory lien (such as tax lien, mechan | claim: K, IL k all that | Amount of claim Do not deduct the value of collateral. \$142,378.00 | Value of collateral that supports this claim | Unsecured portion If any |
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| Part 1: List All Sec. 2. List all secured claim for each claim. If more the much as possible, list the control of the control | cured Claims s. If a creditor has an one creditor has claims in alphabet h, VA 23450 State & Zip Code Check one. | more than one secured claim, list the creditors a particular claim, list the other creditors in a particular claim, list the other creditors in a call order according to the creditor's name. Describe the property that secures the call of the property that secures the call of the claim is considered. As of the date you file, the claim is: Checapply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mort car loan) Statutory lien (such as tax lien, mechant Judgment lien from a lawsuit | claim: K, IL k all that | Amount of claim Do not deduct the value of collateral. \$142,378.00 | Value of collateral that supports this claim | Unsecured portion If any |

Add the dollar value of your entries in Column A on this page. Write that number here: \$142,378.00 If this is the last page of your form, add the dollar value totals from all pages. \$142,378.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | | | Document | Page 1 | 8 of 45 | |
|-----------------------------------|---|---|---|---|---|---|
| Fill | in this inforr | nation to identify your | case: | | | |
| Del | btor 1 | Lynn Denn | | | | |
| | | First Name | Middle Name | Last Name | | |
| | btor 2 buse if, filing) | First Name | Middle Name | Last Name | | |
| | | | NODTHERN BIOTRICT OF | | | |
| Uni | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | |
| Cas | se number | | | | | |
| (if kr | nown) | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
|)ff | ficial Forn | n 106F/F | | | | |
| | | | ho Have Unsecure | ed Claims | | 12/15 |
| ny iche iche eft. iam | executory cont edule G: Execu edule D: Credit Attach the Con e and case nur | racts or unexpired leases tory Contracts and Unexpors Who Have Claims Sectinuation Page to this pagnber (if known). | that could result in a claim. Als ired Leases (Official Form 106G ured by Property. If more space e. If you have no information to | so list executory of 6). Do not include e is needed, copy | Part 2 for creditors with NONPRIORI contracts on Schedule A/B: Property any creditors with partially secured the Part you need, fill it out, number do not file that Part. On the top of an | (Official Form 106A/B) and on claims that are listed in the entries in the boxes on the |
| | | II of Your PRIORITY Un | | | | |
| 1. | | ors have priority unsecure | d claims against you? | | | |
| | No. Go to P | art 2. | | | | |
| _ | ☐ Yes. | u () NONDONOT | V.I. 101. | | | |
| | | II of Your NONPRIORIT | | | | |
| 3. | | ors have nonpriority unsec | | | | |
| | ☐ No. You ha | ve nothing to report in this pa | art. Submit this form to the court v | with your other sche | edules. | |
| | Yes. | | | | | |
| 4. | unsecured clair | m, list the creditor separately | for each claim. For each claim lis | sted, identify what t | b holds each claim. If a creditor has m ype of claim it is. Do not list claims alre three nonpriority unsecured claims fill | eady included in Part 1. If more |
| | | | | | | Total claim |
| 4.1 | Capital | One | Last 4 digits of | account number | 9074 | \$1,380.00 |
| | | / Creditor's Name | | | | |
| | Attn: G | eneral oondence/Bankruptc | v When was the d | laht incurred? | Opened 11/15 Last Active 12/20/16 | |
| | Po Box | | y When was the u | iest ilicuireu : | 12/20/10 | |
| | | ke City, UT 84130 | | | | |
| | | treet City State Zlp Code | As of the date y | ou file, the claim i | s: Check all that apply | |
| | _ | rred the debt? Check one. | _ | | | |
| | ■ Debtor | - | ☐ Contingent | | | |
| | ☐ Debtor | • | Unliquidated | | | |
| | | 1 and Debtor 2 only | ☐ Disputed | IODITY | L. L. C. | |
| | | t one of the debtors and and | | IORITY unsecured | a ciaiin: | |
| | debt | if this claim is for a comm | Obligations a | rising out of a sepa | ration agreement or divorce that you d | id not |
| | _ | m subject to offset? | report as priority | | a plane, and other classics date. | |
| | ■ No | | • | • | g plans, and other similar debts | |
| | ☐ Yes | | Other Specifi | Credit Card | | |

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Case number (if know) Debtor 1 Lynn Denn Costco Go Anywhere Citicard 4.2 \$15,439.00 Last 4 digits of account number 2030 Nonpriority Creditor's Name Opened 11/14 Last Active Po Box 6190 When was the debt incurred? 11/30/16 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.3 Credit One Bank Na 7053 Last 4 digits of account number \$329.00 Nonpriority Creditor's Name Opened 09/16 Last Active Po Box 98873 When was the debt incurred? 12/08/16 Las Vegas, NV 89193 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card 4.4 **Enhanced Recovery** Last 4 digits of account number \$520.00 Nonpriority Creditor's Name PO Box 57547 When was the debt incurred? 2016 Jacksonville, FL 32241 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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| Lyllii Deliii | | Case Humber (II know) | | | | |
|--|---|--|----------|--|--|--|
| Merchants Credit | Last 4 digits of account number | 2498 | \$300.00 | | | |
| Nonpriority Creditor's Name 223 W Jackson Blvd Ste 700 | When was the debt incurred? | Opened 06/13 | | | | |
| Chicago, IL 60606 | | | | | | |
| Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | | | | | | |
| ■ Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| Check if this claim is for a community | Student loans | | | | | |
| debt Is the claim subject to offset? | Obligations arising out of a separe report as priority claims | ration agreement or divorce that you did not | | | | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| — No □ Yes | · | Attorney Edward Hospital | | | | |
| | Other. Specify | | | | | |
| Nationwide Credit & Collections, | | | | | | |
| lnc | Last 4 digits of account number | 4140 | \$180.00 | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy | When was the debt incurred? | Opened 02/14 | | | | |
| 815 Commerce Dr Ste 270 | | | | | | |
| Oak Brook, IL 60523 | | | | | | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| Check if this claim is for a community | ☐ Student loans | | | | | |
| debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | |
| Is the claim subject to offset? | report as priority claims | • | | | | |
| ■ No | Debts to pension or profit-sharing | | | | | |
| Yes | ■ Other. Specify Collection | Attorney Dupage Medical Group | | | | |
| Nationwide Credit & Collections, | | | | | | |
| Inc | Last 4 digits of account number | 9395 | \$157.00 | | | |
| Nonpriority Creditor's Name Attn: Bankruptcy 815 Commerce Dr Ste 270 | When was the debt incurred? | Opened 01/14 | | | | |
| Oak Brook, IL 60523 Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | |
| Who incurred the debt? Check one. | • | , | | | | |
| Debtor 1 only | ☐ Contingent | | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | | | | | |
| Is the claim subject to offset? | report as priority claims | | | | | |
| ■ No | Debts to pension or profit-sharin | | | | | |
| Yes | Other. Specify Collection | Attorney Dupage Medical Group | | | | |

| | Case 18-02103 Doc 1 | | ed 01/24/18 18:19:14 D 1 of 45 | esc Main | | |
|-------|--|--|---|-------------------------|--|--|
| Debte | or 1 Lynn Denn | | 1 of 45 Case number (if know) | | | |
| 4.8 | Nationwide Credit & Collections, | Last 4 digits of account number | 9398 | \$111.00 | | |
| 4.0 | Inc Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ111.00 | | |
| | Attn : Bankruptcy 815 Commerce Dr Ste 270 | When was the debt incurred? | Opened 01/14 | | | |
| | Oak Brook, IL 60523 | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | _ | П. | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | Lateta | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did no | ot | | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | | | |
| | □Yes | ■ Other, Specify Collection | Attorney Dupage Medical Grou | р | | |
| | | | | <u> </u> | | |
| 4.9 | Onemain Financial/Citifinancial | Last 4 digits of account number | 4439 | \$3,543.00 | | |
| | Nonpriority Creditor's Name | | Opened 05/15 Last Active | | | |
| | 6801 Colwell Blvd Ntsb-2320 | When was the debt incurred? | Opened 05/15 Last Active 8/30/16 | | | |
| | Irving, TX 75039 | | 0/00/10 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sep report as priority claims | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | | | |
| | Yes | ■ Other. Specify Unsecured | | | | |
| | | | | | | |
| 4.1 | Verizon | Last 4 digits of account number | 0001 | \$1,500.00 | | |
| 0 | Nonpriority Creditor's Name | | | - + 1,000000 | | |
| | 500 Tecnolgy Dr Ste 500 Weldon Springs, MO 63304 | When was the debt incurred? | Opened 11/14 Last Active 5/31/16 | _ | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | | | | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

debt

■ No
□ Yes

report as priority claims

Other. Specify

Is the claim subject to offset?

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 1 Lynn Denn

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number 6782

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|-----------------|
| T. (.) | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 23,459.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 23,459.00 |

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| Fill in this information to identify your case: |
|---|
| |
| Debtor 1 Lynn Denn |
| First Name Middle Name Last Name |
| Debtor 2 |
| (Spouse if, filing) First Name Middle Name Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |
| Case number |
| (if known) |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Number | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| 0 | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.4 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | <u> </u> |
| | ٠, | | 3. 3 | 0000 | |

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| | | | III Paue /4 i | 11 40 | |
|-------------------------------|--|--|---------------------------|---|---|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Lynn Denn | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filin | g) First Name | Middle Name | Last Name | | |
| United Stat | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | , , | | | | |
| Case numb (if known) | per | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106H | | | | |
| | | obtoro | | | 40/45 |
| schea | ule H: Your Cod | eptors | | | 12/15 |
| ill it out, ar our name | nd number the entries in the and case number (if known) | boxes on the left. Attach . Answer every question | the Additional Page t | to this page. On the top | eded, copy the Additional Page, of any Additional Pages, write |
| 1. Do y | you have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| | nin the last 8 years, have you a, California, Idaho, Louisiana, | | | | states and territories include |
| ■ No | Go to line 3. | | | | |
| | . Did your spouse, former spo | use, or legal equivalent live | with you at the time? | | |
| | | | • | | |
| in line Form 1 | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed the | with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor lame, Number, Street, City, State and Z | P Code | | Column 2: The cred Check all schedules | litor to whom you owe the debt that apply: |
| 3.1 | | | | ☐ Schedule D, line | |
| | Name | | | ☐ Schedule E/F, lin | e |
| | | | | ☐ Schedule G, line | |
| | Number Street | Chata | ZIP Code | _ | |
| (| City | State | ZIP Code | | |
| 22 | | | | ☐ Schedule D, line | |
| 3.2 | Name | | | ☐ Schedule D, line ☐ Schedule E/F, lin | ne |
| | | | | ☐ Schedule G, line | |
| 1 | Number Street | | | _ | |
| (| City | State | ZIP Code | | |

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| | in this information to identify your o | ase: | | | | | | | |
|--------|--|-----------------------------|---|-------------|-------|-----------------------|-------------|------------------------------------|----------|
| De | btor 1 Lynn Denn | | | | | | | | |
| | btor 2 | | | | _ | | | | |
| Uni | ited States Bankruptcy Court for the | e: NORTHERN DISTRIC | CT OF ILLINOIS | | _ | | | | |
| | se number | | _ | | | Check if this i | | | |
| (If Ki | nown) | | | | | ☐ An amend | J | | |
| _ | W : 1 = 400l | | | | | | | ng postpetition following date: | |
| | fficial Form 106l | | | | | MM / DD/ | YYYY | | |
| S | chedule I: Your Inc | ome | | | | | | | 12/1 |
| atta | tuse. If you are separated and you che a separate sheet to this form. The separate sheet to this form. The separate separated and you can be separated as a separated and you can be separated and you can be separated as a sep | | | | | d case number (i | f known). A | | |
| | information. | | | | | | | iling spouse | |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed□ Not employed | | | □ Emp □ Not | employed | | |
| | employers. | Occupation | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | | | | | | | |
| | | How long employed t | here? | | | | | | |
| Pai | rt 2: Give Details About Mo | nthly Income | | | | | | | |
| | imate monthly income as of the dust unless you are separated. | late you file this form. If | you have nothing to re | eport for | any | line, write \$0 in th | e space. In | clude your no | n-filing |
| | ou or your non-filing spouse have m e space, attach a separate sheet to | | ombine the informatio | n for all e | emplo | oyers for that pers | on on the l | ines below. If | you need |
| | | | | | | For Debtor 1 | | ebtor 2 or ling spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 0.00 | \$ | N/A | - |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | N/A | |

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| Deb | tor 1 | Lynn Denn | _ | C | ase number (if kr | iown) | | | | |
|-----|--|---|-----|----|-------------------|-------|-------|------------|----------------|--|
| | | | | | For Debtor 1 | | For | Debtor | 2 or | |
| | | | | | TOT DEDICT T | | | n-filing s | | |
| | Copy | y line 4 here | 4. | _ | \$ | .00 | \$ | | N/A | <u> </u> |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | | \$ 0 | .00 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | | .00 | \$ | | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | | \$ 0 | .00 | \$ | | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | | \$ 0 | .00 | \$ | | N/A | _ |
| | 5e. | Insurance | 5e. | | \$ 0 | .00 | \$ | | N/A | |
| | 5f. | Domestic support obligations | 5f. | | | .00 | \$_ | | N/A | |
| | 5g. | Union dues | 5g. | | | .00 | \$_ | | N/A | |
| | 5h. | Other deductions. Specify: | 5h. | .+ | \$ | .00 | + \$_ | | N/A | <u> </u> |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | ; | \$ C | .00 | \$_ | | N/A | <u>. </u> |
| 7. | Calc | rulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | , | \$ | .00 | \$_ | | N/A | 1 |
| 8. | List a | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | • | | | |
| | 01 | monthly net income. | 8a. | | | .00 | \$_ | | N/A | |
| | 8b. | Interest and dividends | 8b. | | \$ | .00 | \$_ | | N/A | <u> </u> |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | | | | | | |
| | | settlement, and property settlement. | 8c. | | \$1,495 | | \$_ | | N/A | |
| | 8d. | Unemployment compensation | 8d. | | | .00 | \$_ | | N/A | _ |
| | 8e. | Social Security | 8e. | | \$C | .00 | \$_ | | N/A | <u>\</u> |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | | 0.00 | \$_ | | N/A | |
| | 8g. | Pension or retirement income | 8g. | | | .00 | \$_ | | N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h. | .+ | \$ C | .00 | + \$_ | | N/A | <u>. </u> |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,495 | .00 | \$_ | | N/ | A |
| 10. | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | 1,495.00 | + \$ | | N/A | = \$ | 1,495.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | , | L | | | | , |
| 11. | 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00 | | | | | | | | | |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The reset hat amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | | e. 12. | \$ | 1,495.00 |
| | | | | | | | | | Combi month | ned ly income |
| 13. | Do y | ou expect an increase or decrease within the year after you file this form | ? | | | | | | | |
| | | No. | | | | | | | | |
| | | Yes Explain: | | | | | | | | |

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| Fill | in this informa | tion to identify yo | our case: | | | 1 | | |
|------------|------------------------------|------------------------------------|------------------------|--|--|-------------|-------------------|---|
| | otor 1 | Lynn Denn | | | | Chu | eck if this is: | |
| | | Lyiiii Deiiii | | | | | An amended filing | |
| | otor 2 ouse, if filing) | | | | | | | wing postpetition chapter the following date: |
| `` | | | NODE | IEDA DIOTDIOT OF ILLINIA | 010 | | | |
| Unit | ed States Bankr | uptcy Court for the | : NORTE | IERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| 1 | e number nown) | | | | | | | |
| (11 K) | nown) | | | | | | | |
| O | fficial Fo | rm 106J | | | | | | |
| S | chedule | J: Your | Exper | nses | | | | 12/1 |
| Be info | as complete a | and accurate as | possible eded, atta | . If two married people ar ich another sheet to this | | | | |
| Par 1. | t 1: Descr Is this a joir | ibe Your House | hold | | | | | |
| ١. | No. Go to | | | | | | | |
| | | | in a separ | ate household? | | | | |
| | □N | 0 | - | | | | | |
| | ☐ Y | es. Debtor 2 mus | st file Offici | al Form 106J-2, Expenses | for Separate House | ehold of De | ebtor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Daughter | | | Yes |
| | | | | | Son | | 10 | □ No ■ Yes |
| | | | | | | | | □ No |
| | | | | | Daughter | | 12 | Yes |
| | | | | | | | | □ No |
| 3. | Do your exp | enses include | _ | No | | | | ☐ Yes |
| | | f people other t d your depende | han $_{m \Box}$ | Yes | | | | |
| Est | imate your ex | | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | n assistance an | | government assistance i cluded it on <i>Schedule I:</i> \ | | | Your exp | enses |
| 4. | | r home owners | | ses for your residence. I or lot. | nclude first mortgag | e 4. | \$ | 1,124.00 |
| | If not includ | ed in line 4: | | | | | | |
| | 4a. Real e | state taxes | | | | 4a. | \$ | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. | · - | 0.00 |
| | | | | upkeep expenses | | 4c. | | 200.00 |
| 5 | | owner's associat | | dominium dues our residence. such as ho | me equity loans | 4d. 5. | · - | 0.00 |

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| Debtor 1 | | Lynn De | Lynn Denn | | | | |
|----------|---------------|----------------|--|--------------------------------|------|-----------|--------------------------------|
| 6. | Utiliti | ies: | | | | | |
| ٥. | 6a. | | heat, natural gas | | 6a. | \$ | 173.85 |
| | 6b. | - | wer, garbage collection | | | | 44.75 |
| | 6c. | | e, cell phone, Internet, satellite, and cable serv | ices | 6c. | \$ | 210.00 |
| | 6d. | Other. Spe | | | 6d. | · | 0.00 |
| 7. | | | ekeeping supplies | | 7. | \$ | 500.00 |
| 8. | | | children's education costs | | 8. | \$ | 160.00 |
| 9. | | | ry, and dry cleaning | | 9. | \$ | 100.00 |
| | | ٠, | products and services | | 10. | · · | 0.00 |
| | | • | ntal expenses | | 11. | · | 75.00 |
| | | | Include gas, maintenance, bus or train fare. | | | · | |
| | | | ar payments. | | 12. | \$ | 0.00 |
| 13. | Ente | rtainment, | clubs, recreation, newspapers, magazines, | and books | 13. | \$ | 0.00 |
| 14. | Char | itable cont | ributions and religious donations | | 14. | \$ | 0.00 |
| 15. | Insur | rance. | | | | | |
| | | | surance deducted from your pay or included i | | | | |
| | | Life insura | | | 15a. | * | 0.00 |
| | 15b. | Health ins | urance | 1 | 15b. | \$ | 0.00 |
| | 15c. | Vehicle in | surance | 1 | 15c. | \$ | 160.00 |
| | | | rance. Specify: | | 15d. | \$ | 0.00 |
| 16. | | | clude taxes deducted from your pay or include | ed in lines 4 or 20. | | _ | |
| | Spec | • | | | 16. | \$ | 0.00 |
| 17. | | | ease payments: | | | Φ. | 0.00 |
| | | | ents for Vehicle 1 | | 17a. | | 0.00 |
| | | | ents for Vehicle 2 | | 17b. | | 0.00 |
| | | Other. Spe | - | | 17c. | · — | 0.00 |
| | | Other. Spe | · | | 17d. | \$ | 0.00 |
| 18. | | | of alimony, maintenance, and support that | | 18. | \$ | 0.00 |
| 10 | | | your pay on line 5, <i>Schedule I, Your Incom</i> e s you make to support others who do not li | | 10. | \$ | 0.00 |
| 13. | Spec | | s you make to support others who do not in | ve with you. | 19. | Ψ | 0.00 |
| 20 | | · | erty expenses not included in lines 4 or 5 o | f this form or on Schedule | | ur Income | |
| 20. | | | s on other property | | 20a. | | 0.00 |
| | | Real estat | | | 20b. | | 0.00 |
| | | | homeowner's, or renter's insurance | | 20c. | · | 0.00 |
| | | | nce, repair, and upkeep expenses | | 20d. | | 0.00 |
| | | | er's association or condominium dues | | 20e. | · | 0.00 |
| 21 | | r: Specify: | or a description of condominant date | | 21. | · | 0.00 |
| ۷١. | Otile | a. Opechy. | | | ۷۱. | ΤΨ | 0.00 |
| 22. | Calc | ulate your i | monthly expenses | | | | |
| | 22a. <i>i</i> | Add lines 4 | through 21. | | | \$ | 2,747.60 |
| | 22b. | Copy line 2: | 2 (monthly expenses for Debtor 2), if any, fron | Official Form 106J-2 | | \$ | |
| | 22c. / | Add line 22a | a and 22b. The result is your monthly expense | es. | | \$ | 2,747.60 |
| 0.5 | | | | | | | , 1133 |
| 23. | | - | monthly net income. | | | • | |
| | | | 12 (your combined monthly income) from Sch | | 23a. | | 1,495.00 |
| | 23b. | Copy your | monthly expenses from line 22c above. | 2 | 23b. | -\$ | 2,747.60 |
| | 00- | Ch.t | and the same and t | | | | |
| | 23c. | | our monthly expenses from your monthly inco | me. | 23c. | \$ | -1,252.60 |
| | | THE TESUIT | is your monthly net income. | 2 | _00. | | ,, |
| 24. | Do ve | ou expect a | an increase or decrease in your expenses v | vithin the vear after you file | this | form? | |
| | For ex | xample, do yo | ou expect to finish paying for your car loan within the | | | | rease or decrease because of a |
| | modifi | ication to the | terms of your mortgage? | | | | |
| | ■ No | 0. | | | | | |
| | □Y€ | es. | Explain here: | | | | |

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| Fill in this info | ormation to identify your | case: | | | |
|----------------------------------|--|--------------------------|------------------------------|-------------------------|--|
| Debtor 1 | Lynn Denn | | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | rm 106Dec | | | | |
| Declara | tion About a | an Individual | Debtor's Sc | hedules | 12/15 |
| obtaining mon years, or both. | | in connection with a ban | | | ement, concealing property, or 10, or imprisonment for up to 20 |
| Did you p | pay or agree to pay some | eone who is NOT an atto | rney to help you fill out ba | ankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | kruptcy Petition Preparer's Notice, , and Signature (Official Form 119) |
| | nalty of perjury, I declare are true and correct. | that I have read the sun | nmary and schedules filed | l with this declaration | on and |
| X /s/Ly | nn Denn | | X | | |
| , | Denn ture of Debtor 1 | | Signature of D | Debtor 2 | |

Date

Date **January 24, 2018**

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| Fill | in this inform | ation to identify you | r case: | | | |
|---|----------------------------|---|--|--|---|---|
| _ | btor 1 | Lynn Denn | | | | |
| | | First Name | Middle Name | Last Name | | |
| | btor 2 ouse if, filing) | First Name | Middle Name | Last Name | | |
| Un | ited States Bar | kruptcy Court for the: | NORTHERN DISTRICT (| OF ILLINOIS | | |
| Ca | se number | | | | | |
| | nown) | | | | - | Check if this is an mended filing |
| St Be | as complete a | of Financial | ible. If two married people a | | equally responsible for sup | |
| | | ore space is needed,). Answer every que | | this form. On the top of an | y additional pages, write you | ır name and case |
| Pa | rt 1: Give D | etails About Your Ma | arital Status and Where You | Lived Before | | |
| 1. What is your current marital status? | | | | | | |
| | ☐ Married ■ Not marr | ried | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do n | ot include where you live now | <i>ı</i> . | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| 3. stat | | | | | ity property state or territory ico, Texas, Washington and W | |
| | ■ No □ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Pa | rt 2 Explain | n the Sources of You | r Income | | | |
| 4. | Fill in the total | I amount of income yo | u received from all jobs and | ng a business during this yeall businesses, including part e together, list it only once ur | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$2,100.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | | | | Debtor 1 | | Debtor 2 | | |
|----|------------------------------|--|--|--|--|---|--|---|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) |
| | or last caler anuary 1 to | ndar year: December | 31, 2017) | ■ Wages, commissions, bonuses, tips | \$26,000.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | ☐ Operating a | business | |
| | | dar year be December | | ■ Wages, commissions, bonuses, tips | \$21,000.00 | ☐ Wages, com bonuses, tips | missions, | |
| | | | | ☐ Operating a business | | ☐ Operating a | business | |
| | winnings. List each: | If you are fili | ng a joint cas | pensions; rental income; inter se and you have income that y ome from each source separat | ou received together, list it o | only once under De | ebtor 1. | d gambling and lottery |
| | | | , iano | Dobtor 1 | | Dobtor 2 | | |
| | | | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of inc Describe below. | | Gross income (before deductions and exclusions) |
| Pa | rt 3: Lis | t Certain Pa | yments You | Made Before You Filed for I | Bankruptcy | | | |
| 6. | □ No. | Neither De individual puring the No. Yes | Pettor 1 nor Edition 1 nor Edition 1 nor Edition 2 nor Edition 2 nor Edition 2 nor Edition 2 not include to adjustment 2 no Edition 2 nor Edit | each creditor to whom you pai editor. Do not include paymen payments to an attorney for th t on 4/01/19 and every 3 years or both have primarily consu ore you filed for bankruptcy, di | Immer debts. Consumer debted purpose." If you pay any creditor a total did a total of \$6,425* or more test for domestic support obliquis bankruptcy case. It is after that for cases filed on the mer debts. | al of \$6,425* or monion one or more pay gations, such as che or after the date o | re? ments and the ild support a f adjustment. | ne total amount you nd alimony. Also, do |
| | | □ Yes | List below e | each creditor to whom you pai ments for domestic support ol this bankruptcy case. | | | | |
| | Creditor | 's Name and | d Address | Dates of payme | nt Total amount paid | Amount you still owe | Was this p | ayment for |

Case 18-02103 Doc 1 Filed 01/24/18 Entered 01/24/18 18:19:14 Page 32 of 45 Document Case number (*if known*) Debtor 1 Lynn Denn Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11.

Describe the Property

Explain what happened

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Describe the gifts

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your

Describe the action the creditor took

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

Date

Date action was

Dates you gave

the gifts

Official Form 107

Value

Part 5: List Certain Gifts and Contributions

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Yes. Fill in the information below.

accounts or refuse to make a payment because you owed a debt?

court-appointed receiver, a custodian, or another official?

Creditor Name and Address

Yes. Fill in the details.Creditor Name and Address

Nο

■ No
□ Yes

per person

Address:

Value of the property

Amount

Case 18-02103 Doc 1 Filed 01/24/18 Entered 01/24/18 18:19:14 Page 33 of 45 Case number (if known) Document Debtor 1 Lynn Denn 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Date of your Describe any insurance coverage for the loss Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You \$1,500.00 Eric G. Zelazny \$1500.00, including court costs 18400 Maple Creek Drive Tinley Park, IL 60477 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.

Address

Description and value of

property transferred

Describe any property or

paid in exchange

payments received or debts

Person Who Received Transfer

Person's relationship to you

Date transfer was

made

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Case number (if known) Document

Debtor 1 Lynn Denn

| 19. | | thin 10 years before you filed for bankru neficiary? (These are often called asset-pr No | | | ny property to a | a self-settle | ed trust or similar device | of ' | which you are a |
|------|------------|---|-------|--|------------------------|---------------|--|------|---|
| | | Yes. Fill in the details. | | | | | | | |
| | Na | ame of trust | | Description and | value of the pro | perty trans | sferred | | Date Transfer was |
| Par | t 8: | List of Certain Financial Accounts, In | ıstru | ıments, Safe Depos | it Boxes, and S | torage Unit | ts | | |
| 20. | sol Inc | thin 1 year before you filed for bankruptodd, moved, or transferred? Elude checking, savings, money market, uses, pension funds, cooperatives, asso | or o | ther financial accou | ınts; certificate: | s of deposi | • | | |
| | | No Yes. Fill in the details. | | | | | | | |
| | Ac | ame of Financial Institution and ddress (Number, Street, City, State and ZIP de) | | ast 4 digits of ecount number | Type of accoinstrument | ount or | Date account was closed, sold, moved, or transferred | | Last balance before closing or transfer |
| 21. | | you now have, or did you have within 1 sh, or other valuables? | yea | r before you filed fo | or bankruptcy, a | ny safe de | posit box or other depo | sito | ry for securities, |
| | | No Yes. Fill in the details. | | | | | | | |
| | | ame of Financial Institution ddress (Number, Street, City, State and ZIP Code) | | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still have it? |
| 22. | Hav | ve you stored property in a storage unit | or p | lace other than you | r home within 1 | l year befo | re you filed for bankrup | tcy? | • |
| | | No Yes. Fill in the details. | | | | | | | |
| | | ame of Storage Facility ddress (Number, Street, City, State and ZIP Code) | | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | Describe | the contents | | Do you still have it? |
| Par | t 9: | Identify Property You Hold or Contro | l for | Someone Else | | | | | |
| 23. | | you hold or control any property that so someone. | ome | one else owns? Inc | lude any prope | rty you bor | rowed from, are storing | for, | , or hold in trust |
| | | No Yes. Fill in the details. | | | | | | | |
| | | wner's Name ddress (Number, Street, City, State and ZIP Code) | | Where is the pro (Number, Street, City, Code) | | Describe | the property | | Value |
| Par | t 10 | Give Details About Environmental Inf | form | nation | | | | | |
| For | the | purpose of Part 10, the following definit | ions | apply: | | | | | |
| | Fn | vironmental law means any federal, stat | e. or | local statute or rec | ulation concer | nina polluti | ion, contamination, rele | ase | s of hazardous or |

- toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Lynn Denn

| 24. | Has any governmental unit notified you that yo ■ No | u may be liable or potentially liable u | under or in violation of an environme | ntal law? | | | | | | |
|-----|---|--|--|--------------------|--|--|--|--|--|--|
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | | |
| 25. | Have you notified any governmental unit of any | y release of hazardous material? | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | | | |
| 26. | Have you been a party in any judicial or admini | strative proceeding under any environ | onmental law? Include settlements a | nd orders. | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | | | |
| Par | 11: Give Details About Your Business or Cor | nnections to Any Business | | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have any | of the following connections to any | business? | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | | |
| | ☐ An owner of at least 5% of the voting or | r equity securities of a corporation | | | | | | | | |
| | ■ No. None of the above applies. Go to Part | 12. | | | | | | | | |
| | Yes. Check all that apply above and fill in t | the details below for each business. | | | | | | | | |
| | Business Name De Address | escribe the nature of the business | Employer Identification number Do not include Social Security r | | | | | | | |
| | | ame of accountant or bookkeeper | Dates business existed | idiliber of friid. | | | | | | |
| 28. | Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties. | did you give a financial statement to | anyone about your business? Inclu | de all financial | | | | | | |
| | ■ No □ Yes. Fill in the details below. | | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | ate Issued | | | | | | | | |
| | | | | | | | | | | |

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| Part 1 | 2: Sign Below | |
|-------------------|---|--|
| are tru with a | | Affairs and any attachments, and I declare under penalty of perjury that the answers atement, concealing property, or obtaining money or property by fraud in connection 0, or imprisonment for up to 20 years, or both. |
| /s/ Ly | nn Denn | |
| Lynn | Denn | Signature of Debtor 2 |
| Signa | ture of Debtor 1 | |
| Date | January 24, 2018 | Date |
| Did vo | u attach additional pages to Your Statement of Fi | nancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No | , , | , |
| ☐ Yes | | |
| Did yo | u pay or agree to pay someone who is not an atto | rney to help you fill out bankruptcy forms? |
| ■ No | | |
| ☐ Yes | . Name of Person Attach the Bankruptcy Per | ition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| | | | 3.5 | |
|---------------------------------|--|-----------------------|---|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Lynn Denn | | | |
| | First Name | Middle Name | Last Name | - |
| Debtor 2 | First Name | Malala Nassa | Last Name | _ |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DIS | TRICT OF ILLINOIS | _ |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Official Fo Stateme i | | n for Indiv | iduals Filing Under Cha | pter 7 12/15 |
| | lividual filing under cha | | Il out this form if: | |
| | ve claims secured by yo | | | |
| You must file th | ever is earlier, unless th | ithin 30 days after | oot expired. you file your bankruptcy petition or by the da le time for cause. You must also send copies | |
| | eople are filing togethe | r in a joint case, bo | oth are equally responsible for supplying corr | ect information. Both debtors must |
| | and accurate as possib your name and case nur | | s needed, attach a separate sheet to this form | n. On the top of any additional pages, |
| Part 1: List Y | our Creditors Who Hav | e Secured Claims | | |
| 1. For any credit | | art 1 of Schedule D |): Creditors Who Have Claims Secured by Pro | perty (Official Form 106D), fill in the |
| | reditor and the property t | hat is collateral | What do you intend to do with the property secures a debt? | y that Did you claim the property as exempt on Schedule C? |
| Creditor's | | | ☐ Surrender the property. | □No |
| name: | | | Retain the property and redeem it. | - |
| | _ | | ☐ Retain the property and enter into a | ☐ Yes |

Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's □ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes \square Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's □ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes \square Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's \square Surrender the property. □ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Lynn Denn | Case number (if kr | Case number (if known) | | |
|--|--|--|--|--|
| name: Description of property securing debt: | □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ☐ Yes | | |
| in the information below. Do not list real es | operty Leases that you listed in Schedule G: Executory Contracts and Unex tate leases. Unexpired leases are leases that are still in effect operty lease if the trustee does not assume it. 11 U.S.C. § 365 | t; the lease period has not yet ended. | | |
| Describe your unexpired personal property | y leases | Will the lease be assumed? | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Lessor's name: Description of leased Property: | | □ No | | |
| Part 3: Sign Below | ve indicated my intention about any property of my estate tha | | | |
| | | | | |
| X /s/ Lynn Denn Lynn Denn Signature of Debtor 1 | X Signature of Debtor 2 | | | |
| Date January 24, 2018 | Date | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-02103 Doc 1 Filed 01/24/18 Entered 01/24/18 18:19:14 Desc Main Document Page 43 of 45

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | Lynn Denn | | Case No. | | |
|-------|--|---|---|------------------------|-----------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | NSATION OF ATTOR | NEY FOR DI | EBTOR(S) | |
| | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | |
| | For legal services, I have agreed to accept | | \$ | 1,165.00 | |
| | Prior to the filing of this statement I have received. | | \$ | 1,165.00 | |
| | Balance Due | | \$ | 0.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed comp | pensation with any other person u | ınless they are mem | bers and associates of | of my law firm. |
| | ☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national copy of the agreement. | | | | law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to re | ender legal service for all aspects | of the bankruptcy of | ease, including: | |
| | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, stat c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho | tement of affairs and plan which ors and confirmation hearing, and reduce to market value; exec ons as needed; preparation a | may be required; d any adjourned hea mption planning; | rings thereof; | filing of |
| 6. | By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding. | | | es, relief from sta | y actions or |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of an pankruptcy proceeding. | y agreement or arrangement for p | payment to me for r | epresentation of the | debtor(s) in |
| J | anuary 24, 2018 | /s/ Eric Zelazny | | | |
| L | Date | Eric Zelazny Signature of Attorney | , | | |
| | | Law Offices of Eri | c Zelazny | | |
| | | 18400 Maple Cree Chicago Heights, | | | |
| | | 708-444-4333 | IL 30411 | | |
| | | eric@lwslaw.com | | | |
| | | Name of law firm | | | |

United States Bankruptcy CourtNorthern District of Illinois

| | | 1 (of the H District of Himors | | |
|-------|--|---|-------------------------------|----------------|
| In re | Lynn Denn | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR | MATRIX | |
| | | Number of | of Creditors: | 10 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of cred | litors is true and correct to | the best of my |
| Date: | January 24, 2018 | /s/ Lynn Denn Lynn Denn Signature of Debtor | | |

Blitt and Gaines, P.C. 661 Glenn Avenue Wheeling, IL 60090

Capital One Attn: General Correspondence/Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Costco Go Anywhere Citicard Po Box 6190 Sioux Falls, SD 57117

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

Enhanced Recovery PO Box 57547 Jacksonville, FL 32241

Loancare Inc Po Box 8068 Virginia Beach, VA 23450

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Nationwide Credit & Collections, Inc Attn: Bankruptcy 815 Commerce Dr Ste 270 Oak Brook, IL 60523

Onemain Financial/Citifinancial 6801 Colwell Blvd Ntsb-2320 Irving, TX 75039

Verizon 500 Tecnolgy Dr Ste 500 Weldon Springs, MO 63304